PTO/SB/06 (08-0

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Substitute for Form PTO-875						09/807/860		
CLAIMS AS FILED - PART I (Column 1) (Column 2)			SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
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If the entry in column 1 If the "Highest Number	is less than the entry	in column 2, write	"0" in column 3.	L.		OR	ADD'L FEE	
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This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1459.

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN (Celumn 1) (Column 2) SMALL ENTITY OR SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA RATE FFF RATE FEE BASIC FEE 6.34.3 ari CFA 1.10(c) minus 20 ± OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR If the difference in column 1 is tess than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN olumn 1) (Column 2) (Column 3) OR SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING PRESENT NUMBER RATE MENT RATE ADDI-AFTER PREVIOUSLY **EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total Minus (37 CFR 1.16(c) AMEND OR Independent (37 CFR 1,16(b)) Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ω REMAINING PRESENT NUMBER RATE ADDI-RATE ADD1 ENDMENT **AFTER** PREVIOUSLY **EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FFF Total (37 CFR 1.16(c)) Minus X S OR X \$ Independent (37 CFR 1.16(b)) Minus OR AZ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR + \$ TOTAL TOTAL WMANA ADDIL FEE OB ADD'L FEE 1227 10 CLAINS NOTSHOUM (Column 2) (Column 3) CLAIMS HIGHEST O REMAINING PRESENT NUMBER RATE ADDI-RATE ADDI IENT **AFTER** PREVIOUSLY **EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(c)) ENDM Minus OR Independent (37 CFR 1.16(b)) Minus OR Z FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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